

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  03D2092106	<b>(X3) Date Survey Completed</b>  07/23/2024
<b>Name of Provider or Supplier</b>  Center For Dermatology, Pllc	<b>Street Address, City, State</b>  11209 Tatum Blvd, Ste 175, Phoenix, AZ	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D5433</b>	<p>MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(b)(1)</p> <p>For equipment, instruments, or test systems developed in-house, commercially available and modified by the laboratory, or maintenance and function check protocols are not provided by the manufacturer, the laboratory must establish a maintenance protocol that ensures equipment, instrument, and test system performance that is necessary for accurate and reliable test results and test result reporting. The laboratory must perform and document the maintenance activities specified in paragraph (b)(1)(i) of this section.</p> <p>This STANDARD is not met as evidenced by: Based on lack of a microscope maintenance policy for review and interview with the facility personnel, the laboratory failed to establish a maintenance policy for the microscope used to read patient slides. Findings include: 1. The laboratory performs the microscopic interpretation of tissue specimens in the subspecialty of Histopathology, with a reported annual test volume of 1,000. 2. No established maintenance policy was presented for review during the survey for the microscope used to read patient slides. 3. The facility personnel interviewed on July 23, 2024 at 10:28 AM confirmed the laboratory failed to have an established maintenance protocol in place for the microscope.</p>
<b>D5803</b>	<p>TEST REPORT CFR(s): 493.1291(b)</p> <p>Test report information maintained as part of the patient's chart or medical record must be readily available to the laboratory and to CMS or a CMS agent upon request.</p> <p>This STANDARD is not met as evidenced by:</p>

Based on lack of a pathology test reports for review in the electronic medical record (EMR), review of laboratory policy and interview with the facility personnel, the laboratory failed to provide evidence of the pathology reports maintained in the EMR for two out of three patient records reviewed during the survey. Findings include: 1. The laboratory performs Frozen Biopsy testing in the subspecialty of Histopathology. The laboratory utilizes an electronic medical record (EMR) system to maintain patients' pathology test reports. 2. The laboratory's established policy states, "All pathology documentation is kept electronically in EMA EHR System." 3. The laboratory failed to provide evidence of the frozen biopsy test reports maintained in the EMR for two of out three patient records reviewed during the survey (PT23-01 and PT23-04). 4. The facility personnel interviewed on July 23, 2024 at 10:02 AM confirmed the laboratory failed to provide evidence of the frozen biopsy reports maintained in the EMR as indicated above. 5. The laboratory's reported annual test volume in the subspecialty of Histopathology is 1,000.